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FILING DATE MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) CLAIMS AFTER 1st AMENDMENT AFTER 2nd AMENDMENT AS FILED IND. IND. DEP. IND. IND. DEP. IND. DEP. IND. DEP. TOTAL IND. TOTAL IND. _1 _1 _! TOTAL DEP. **李维拉斯** 海沟域域 TOTAL NICHTA WY LAST 数级协

*MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-1360 (REV. 3-78)

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